DOCKET NO.: N0427,90000US00

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, mailing address and citizenship are as stated below next to my name.

I believe the named inventor(s) to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled: METHOD AND APPARATUS FOR SEGMENTATION OF AUDIO INTERACTIONS

the specification of which:

- [X] is attached hereto;
- [] was filed on , as Application No. , Confirmation No. , bearing Docket No. , and was amended on (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56.

The undersigned hereby appoints the following attorney(s) and/or agent(s) to prosecute this application and all related divisional, continuing, substitute, renewal, reissue, re-exam, and to conduct all business in the Patent and Trademark Office connected therewith:

☑ Practitioners associated with Wolf, Greenfield & 23628
Sacks, P.C.'s Customer Number:

□ Direct all correspondence to the address associated with Wolf, Greenfield & Sacks, P.C.'s Customer Number

Address all telephone calls to Douglas R. Wolf at telephone no. (617) 646-8000.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Docket No.: N0427.90000US00 Declaration for Patent Application

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Inventor's signature Full name first inventor: Citizenship: Residence: Mailing Address:	•	Date